## 2005 LIMITED LIABILITY COMPANY

TITLE

STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

## Apr 20, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # L03000030758 1. Entity Name ITERA TIMBERLAND & DEVELOPMENT STRATEGIES LLC Principal Place of Business \_\_ Mailing Address 9995 GATE PARKWAY N. 9995 GATE PARKWAY N. SUITE 400 SUITE 400 JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246 CR2E083 (10/03) 03242005 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0212018 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAX CO. DO NOT WRITE 50 NORTH LAURA ST SUITE 3300 IN THIS SPACE JACKSONVILLE, FL 32202 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE NAME ITERA INTERNATIONAL ENERGY CORP. STREET ADDRESS 9995 GATE PARKWAY N., SUITE 400 JACKSONVILLE, FL 32246 U000000318678 CITY-ST-ZIP 04/20/05-80070-003 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

**FILED** 

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Lawling	Nick T.	Kavali eros	Pres .3/28/05	904-996-88	<u>j</u> oc
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Dale	Daytime Phone #	_	